PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/517927

CLAIMS AS FILED - PART I								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
U.O. NATIONAL OTA CO			(Colum	(Column 1)		(Column 2)		PE		OR T	SMALL	ENTITY
U.S. NATIONAL STAGE FEES					<u> </u>		l L	RATE	FEE		RATE	FEE
BAS	SIC FEE		SMALL ENT		1	GE ENT. = \$ 300	ВА	SIC FEE		OR	BASIC FEE	300
EXA	AMINATION FE	EE ·	Satisfies PCT A (4) = \$50	0/\$100	\$	ther situations = \$ 100 / \$ 200	EX	AM. FEE		1	EXAM. FEE	200
SEARCH FEE			U.S. is ISA = \$ ALL other cou	ountries =	All ot	ther situations = \$ 250 / \$ 500	SE/	ARCH FEE		1	SEARCH FEE	400
FEE	E FOR EXTRA S	SPEC. PGS.	min	nus 100 =		/ 50 =	х	\$ 125 =		1	X \$ 250 =	
тот	TAL CHARGEA	BLE CLAIMS	19 mi	inus 20 =	*		>	< \$ 25 =		OR	X \$ 50 =	
IND	EPENDENT CL	AIMS	2 r	ninus 3 =	*			\$ 100 =		OR	X \$ 200 =	
MUL	LTIPLE DEPEN	NDENT CLAIM PR	ESENT				+	\$ 180 =		OR	+ \$ 360 =	
* If	the difference	e in column 1 is	less than zero	o, enter "C)" in co	olumn 2		TOTAL		OR	TOTAL	900
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL ENTITY			OTHER THAN SMALL ENTITY	
NT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	*	Minus	**		=	L×	\$ 25 =		OR	X \$ 50 =	
AME	Independent	*	Minus	***		=	х	\$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+	\$ 180 =		OR	+ \$ 360 =	
							TOT	AL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)		· .		_		
		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	х	\$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		= .	X:	\$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				LAIM		+ 5	\$.180 =		OR	+ \$ 360 =	·
							TOT	AL ADDIT. FEE		OR	TOTAL ADDIT.	
											· · · · · · · · · · · · · · ·	
*	If the entry in colu	umn 1 is less than the	e entry in column 2	2, write "0" in	ı column	3.		•				İ

FORM PTO-875 (Rev. 02/2005)

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.